



Families First Coronavirus Response Act

Emergency Paid Sick Leave Emergency Family and Medical Leave Act

On March 18, 2020, the President of the United States signed HR 6201 into law, otherwise known as the Families First Coronavirus Response Act (FFCRA), with an effective date of April 1, 2020. This law provides Emergency Paid Sick Leave (EPSL) and expanded paid leave under the Family and Medical Leave Act (FMLA) for COVID-19 related absences. On March 31, 2020, the Orange County Board of Supervisors approved expanded measures to further provide relief to employees.

County employees may be eligible for the following paid leaves due to a qualifying reason for hours that they are unable to work or telecommute. Qualifying reasons for absence can be found at the following link:

https://www.dol.gov/sites/dolgov/files/WHD/posters/FFCRA_Poster_WH1422_Non-Federal.pdf

Emergency Paid Sick Leave

- Eligible Full-Time Regular and Limited-Term employees shall receive up to 80 hours of Emergency Paid Sick Leave (EPSL) at their regular rate of pay for any EPSL qualifying absence.
- Eligible Extra-Help, Part-Time and other employees as defined by law will receive an amount of EPSL hours tied to their regular work schedule (allowing for the equivalent of two work weeks of leave), as determined by the FFCRA or relevant regulations. Such employees will also receive their regular rate of pay for any EPSL qualifying absence.
- The terms and conditions of EPSL will otherwise be governed by the FFCRA and any relevant regulations.

Emergency Family and Medical Leave Act

- Eligible employees who qualify for Emergency Family and Medical Leave Act (EFMLA) under the FFCRA shall receive up to twelve weeks of EFMLA to care for a child whose school or child-care facility is closed because of COVID-19, the final 10 weeks of which will be paid at two-thirds their regular rate of pay. An employee may use EPSL or any other leave balances (including Advanced Sick Leave) for the first two weeks, which are otherwise unpaid.
- Eligible employees may also use their leave balances to make up any difference between the two-thirds of pay and their regular rate of pay during this time. Employees may also use any remaining Advanced Sick Leave.
- The terms and conditions of EFMLA will otherwise be governed by the FFCRA, current FMLA law, and any relevant regulations.

County “Health Care Providers” and “Emergency Responders” COVID-19 Leave

The Department of Labor has provided guidelines regarding the definitions of “health care providers” and “emergency responders” which can be located at:

<https://www.dol.gov/agencies/whd/pandemic/ffcra-questions>

The FFCRA allows employers to exempt “health care providers” and “emergency responders” from receiving Emergency Paid Sick Leave and Emergency Family and Medical Leave, however the County Board of Supervisors approved the use of similar leave equal to other County employees:

- For County employees who are “health care providers” and “emergency responders,” as defined by the FFCRA and any relevant regulations, will receive 80 hours of sick leave at their regular rate of pay, under the terms and conditions that other County employees receive EPSL, except that use of such leave is subject to Department Head approval to ensure that critical health and public safety needs are met.
- Outside of the legal requirements of the FFCRA, “health care providers” and “emergency responders” will be provided with up to 12 weeks of leave, under the terms and conditions that other County employees receive EFMLA, with the final 10 weeks being paid at two-thirds of their regular rate of pay, except that the use of such leave is subject to Department Head approval to ensure that critical health and public safety needs are met.

How do I use/request these paid leaves?

You may eligible for EPSL and/or EFMLA for a qualifying reason for hours that you are unable to work or telecommute.

You are to notify your supervisor regarding absence due to an EPSL qualifying reason through your department’s normal call-out procedures. Your supervisor will ensure you meet the requirements for the absence. You are to then use pay code EPSL on your timesheet for the absence.

When you are off work due to caring for your child whose school or place of care is closed due to a COVID-19 related reason, the County Leave of Absence process is to be followed – even for employees who are already currently on an approved leave for a qualifying reason. You are to complete a Leave of Absence form and the new Emergency Family and Medical Leave Act Certification form (Attached). The Leave of Absence and certification form is to be submitted to your Human Resource Services (HRS) team who will review the request to determine if you qualify for the leave. Your HRS representative will notify you if you qualify for the leave and how to complete your timesheet.

The paid leave provisions outlined above will apply to leave taken between April 1, 2020 and December 31, 2020.

Leave Timelines Incorporating Families First Coronavirus Response Act

	FFCRA Emergency FMLA**			
	Week 1	Week 2	Week 3	through Week 12
Care for Other and School Closure/Child Care (related to COVID-19)	New EPSL Sick Leave - up to 80 hours Extra Help & Part-Time Eligible for Average Hours per Pay Period		Pay 2/3 Hourly Rate May Supplement with Accrued Balances	
EE Sick or Quarantined (related to COVID-19)	New EPSL Sick Leave - up to 80 hours		Unpaid - May Post Accrued Balances or Remaining Advance Sick Leave to Receive Pay Follow Non-Emergency FMLA Eligibility and Procedure	
<p align="center">*Future balances will be used to offset any sick leave hours advanced **FFCRA protected leave is effective April 1, 2020 through December 31, 2020</p>				

For further information regarding Emergency Paid Sick Leave or Emergency Family and Medical Leave, please contact your Human Resource Services representative.



Emergency Family and Medical Leave Act Certification

I certify (check all that apply):

I am not able to be at work or telecommute (for some or all of my regularly scheduled hours) due to caring for my son or daughter whose school or childcare provider is unavailable due to COVID-19 related reasons.

Name and city of child's school or childcare provider _____

My "son or daughter" is: my own child, (which includes your biological, adopted, or foster child, your stepchild, a legal ward, or a child for whom you are standing in loco parentis — someone with day-to-day responsibilities to care for or financially support a child)

My son or daughter is an adult (i.e., one who is 18 years of age or older), and who has a mental or physical disability and is incapable of self-care because of that disability.

I certify that the above information is true and correct to the best of my knowledge.

Print Name

Signature

Date